

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Attorney Docket No.:

**59046.000044**

In re Application Of Yaron Ilan et al.  
Application Number 10/733,488  
Filed December 10, 2003  
For REGULATION OF IMMUNE RESPONSE BY MANIPULATION  
OF INTERMEDIARY METABOLITE LEVELS

Group Art Unit 1648  
Examiner Emily M. Le

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate fee is as follows:

	Large Entity	Small Entity	Amount
<input type="checkbox"/> One Month	\$ 120.00	\$ 60.00	\$
<input type="checkbox"/> Two Month	\$ 450.00	\$ 225.00	\$
<input checked="" type="checkbox"/> Three Month	\$1020.00	\$ 510.00	<b>\$510.00</b>
<input type="checkbox"/> Four Month	\$1590.00	\$ 795.00	\$
<input type="checkbox"/> Five Month	\$2160.00	\$1080.00	\$

- ☒ Applicant claims small entity status. See 37 CFR 1.27.  
☒ A check in the amount of the fee is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **50-0206**. A duplicate of this sheet is attached.

I am the ☐ applicant/inventor.  
☐ assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;  
☒ attorney or agent of record.  
☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a).

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**August 23, 2006**

Date

Signature

**Sheridan K. Snedden for Robert M. Schulman**

Typed or Printed Name

**55,998 for 31,196**

Registration Number (if applicable)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of \_\_\_\_\_ form(s) is/are submitted.